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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/628,906 Confirmation No.: 7434
Applicant : Alan Marshall, et al.
Filing Date : July 28, 2003
Title : Methods and Systems for Reducing Leakage Current in Semiconductor Circuits
Group Art Unit : 2816
Examiner : My Trang Ton
Docket No. : 703567.4001
Customer No. : 34313

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

ELECTION AND RESPONSE TO RESTRICTION REQUIREMENT

Sir:

1. Election

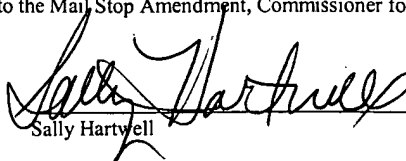
In response to the Office Action dated November 3, 2004 Applicant hereby elects to prosecute, without traverse, Claims 41-69, drawn to a reconfigurable device, classified in class 327, subclass 565.

An action on the merits with regard to the elected claims is respectfully requested.

CERTIFICATE OF MAILING
37 CFR §1.8

I hereby certify, pursuant to 37 CFR §1.8, that I have reasonable basis to expect that that this paper or fee (along with any referred to as being attached or enclosed) would be mailed or transmitted on or before the date indicated with the United States Postal Service with sufficient postage as first class mail on the date shown below in an envelope addressed to the Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated: December 2, 2004


Sally Hartwell

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2. REQUEST FOR EXTENSION OF TIME:

☐ The proceedings herein are for a patent application and the provisions of 37 CFR § 1.136 apply. Applicant petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/> one month	\$55.00	\$110.00
<input type="checkbox"/> two months	\$215.00	\$430.00
<input type="checkbox"/> three months	\$490.00	\$980.00
<input type="checkbox"/> four months	\$765.00	\$1,530.00
<input type="checkbox"/> five months	\$1,040.00	\$2,080.00
		Fee 0.00

3. METHOD OF PAYMENT OF FEES:

- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☐ Charge Orrick's Deposit Account No. **15-0665** in the amount of \$_____.
- ☒ The Commissioner is authorized to charge Orrick's Deposit Account No. **15-0665** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account No. **15-0665**.

Respectfully submitted,

ORRICK, HERRINGTON & SUTCLIFFE LLP

Dated: December 2, 2004

By: Donald Daybell
Donald Daybell
Reg. No. 50,877

Orrick, Herrington & Sutcliffe LLP
4 Park Plaza, Suite 1600
Irvine, CA 92614-2558
Tel. 949-567-6700
Fax: 949-567-6710
Customer Number: 34313